



## PART B - FEE(S) TRANSMITTAL

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Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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7590

06/24/2003

Fulwider Patton Lee & Utecht LLP  
Howard Hughes Center  
Tenth Floor  
6060 Center Drive  
Los Angeles, CA 90045

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

JOHN S. NAGY, ESQ.

(Depositor's name)

(Signature)

July 24, 2003

(Date)

07/30/2003 GWORDOF2 00000026 09660812

01 FC:1501 1300.00 OP

02 FC:8001 9.00 UP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/660,812	09/12/2000	Kenny L. Dang	ACS 54573 (23111)	8165

TITLE OF INVENTION: COVERED STENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	09/24/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHATTOPADHYAY, URMI	3738	623-001120

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 FULWIDER PATTON  
LEE & UTECHT, LLP  
2  
3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advanced Cardiovascular Systems, Inc. Santa Clara, California 95051

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee  
☒ Advance Order - # of Copies 3

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(Date)

July 24, 2003

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